

my  
slip

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SW</i>	<i>62801</i>	<i>4/17</i>
O.I.P.E. CLASSIFIER		<i>19</i>	<i>1/22</i>
FORMALITY REVIEW	<i>SL</i>	<i>811</i>	<i>8/4/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral) ... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	12-14-00
2	12-14-00
3	12-14-00
4	12-14-00
5	12-14-00
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8	12-14-00
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49	12-14-00
50	12-14-00

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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